

**LOBBYING REGISTRATION FORM**

To be used for initial registrations and renewals.

**Instructions**

1. Print in ink or type.  
2. Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.  
3. Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Hunt Darrell W.  
Last First MI

2. BUSINESS PHONE 225-768-7446  
Area Code and Phone Number

3. BUSINESS ADDRESS 5518 Moss Side Lane, Baton Rouge, LA 70808  
Street and No. City State Zip

MAILING ADDRESS Same  
Street and No. City State Zip

4. EMPLOYER The Alchemind Group (self)

5. EMPLOYER'S ADDRESS Same  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name see attachment

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

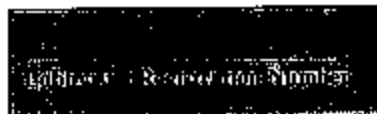
**FOR OFFICE USE ONLY**Postmark Date: 01/31/06

PEN. 2006  
V# 7746  
\$110.00W8

1000326

**HAND DELIVERED**

# LOBBYING REGISTRATION FORM



2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

4. Name \_\_\_\_\_

Address \_\_\_\_\_

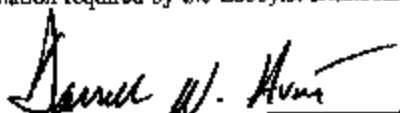
Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

  
Signature of Lobbyist

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY

1.)     **Name:**                   Community Hospital Coalition ✓  
       **Address:**           214 N. 3<sup>rd</sup> Street, Ste. 2B  
                              Baton Rouge, La. 70801-1304

**Business Purpose:**           representation of coalition

**Does this person/organization pay you?**       No

**If NO, who pays you?**       Milling, Benson, Woodward law firm

2.)     **Name:**                   Friends of City Park of New Orleans ✓  
       **Address:**           1 Palm Drive  
                              New Orleans, La. 70124-4608

**Business Purpose:**           representation of organization

**Does this person/organization pay you?**       Yes

3.)     **Name:**                   Louisiana Cable Television Association ✓  
       **Address:**           763 North Street  
                              Baton Rouge, La. 70802

**Business Purpose:**           representation of organization

**Does this person/organization pay you?**       Yes

4.)     **Name:**                   Louisiana Society for Respiratory Care ✓  
       **Address:**           5518 Moss Side Lane  
                              Baton Rouge, La. 70808

**Business Purpose:**           representation of the state's respiratory therapists

**Does this person/organization pay you?**       Yes

5.)     **Name:**                   Louisiana Trial Lawyers Association ✓  
       **Address:**           442 Europe Street  
                              Baton Rouge, La. 70802

**Business Purpose:**           representation of association

**Does this person/organization pay you?**       Yes

6.)     **Name:**                   Milling, Benson, Woodward ✓  
       **Address:**           9100 Bluebonnet Center Blvd., Ste. 402  
                              Baton Rouge, La. 70809

**Business Purpose:**           representation of the Community Hospital Coalition

**Does this person/organization pay you?** Yes

7.) **Name:** NOCCA Institute ✓  
**Address:** 2800 Chartres Street  
New Orleans, La. 70130

**Business Purpose:** representation of the NOCCA Institute

**Does this person/organization pay you?** Yes

8.) **Name:** Paschall & Associates ✓  
**Address:** 2300 Cottondale Lane, Ste. 200  
Little Rock, AR 72202

**Business Purpose:** representation of company's interests

**Does this person/organization pay you?** Yes

9.) **Name:** Penn Gaming International ✓  
**Address:** 825 Berkshire Blvd.  
Wyomissing, PA. 19610

1) **Business Purpose:** representation of company's interests in Louisiana

**Does this person/organization pay you?** Yes

10.) **Name:** Recording Industry Association of America ✓  
**Address:** 1330 Connecticut Ave., NW, Ste. 300,  
Washington, DC 20036

**Business Purpose:** representation of the association

**Does this person/organization pay you?** Yes

11.) **Name:** Sierra Club ✓  
**Address:** PO Box 80631  
Baton Rouge, La. 70898-0631

**Business Purpose:** representation of the Delta Chapter of the Sierra Club

**Does this person/organization pay you?** Yes